

Abstract 528

TITLE: The Integration of HIV, STD, TB and Drug Abuse Services

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PROJECT: The City of Baltimore (Maryland) Health Department (BHD) manages categorical programs providing HIV, STD, TB, and drug abuse services to vulnerable populations. For example, more than 27,000-29,000 visits each year occur at the Baltimore Department of Public Health's STD programs, and the Department provides primary care for more than 2,000 HIV-positive persons. Support of city officials and willingness to consider the implementation of the demonstration project and the presence of academic centers in Baltimore are complimentary resources.

SETTINGS: Baltimore STD, HIV and Drug Abuse Centers

RESULTS: A case study by BHD was conducted to determine the most effective means of establishing an integrated HIV, STD, TB and drug abuse services system. Local epidemiologic data indicate that a significant proportion of persons diagnosed with HIV also have been diagnosed with a sexual transmitted disease, have been drug abusers and have a dual diagnosis of tuberculosis. In most communities, services for each condition are fragmented within agencies and linkages among providers across the city further disconnect prevention, care and treatment services. Benefits of services integration include: the ability to better target services for high-risk individuals with multiple health and social service needs and deliver comprehensive services for people already in care systems who have multiple diagnoses; greater service accessibility and continuity; increase early intervention and prevention; reduce duplication and reduced waste and inefficiency, and reduce cost and ensure greater accountability.

LESSONS LEARNED: The case study provides a format which other cities can adopt if they are considering integrating HIV, STD, TB or drug abuse services. Services integration may be threatening to categorically funded program personnel, but will ultimately benefit them and their programs. Employees working in categorical programs have generally operated in isolation and derived benefits from collaboration with colleagues. Finally, program clients received more comprehensive prevention, care and services from an integrated service delivery, especially since programs often serve the same persons.

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